| CLAIMS ONLY | | | | | | Application Number | | Filing Date |
|---|---|---|---|---|---|---|---|---|

Application Number: OC546356 (handwritten)

Applicant(s)

| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | | Indep | Depend | Indep | Depend | Indep | Depend |
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| | Indep | Depend | Indep | Depend | Indep | Depend | 51 | | | | | | |
| 1 | | | | | | | 52 | | | | | | |
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| 3 | | | | | | | 54 | | | | | | |
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| 11 | | | | | | | 62 | | | | | | |
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| 33 | | | | | | | 84 | | | | | | |
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| 35 | | | | | | | 86 | | | | | | |
| 36 | | | | | | | 87 | | | | | | |
| 37 | | | | | | | 88 | | | | | | |
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| Total Indep | | | | | | | Total Indep | | | | | | |
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| Total Claims | | | 2 | | | | Total Claims | | | | | | |